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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | ☐ Chapter 12 ☐ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----------------------------|--|
| Olutayo | |
| First name | First name |
| | |
| Middle name | Middle name |
| Sholana | |
| Last name | Last name |
| | |
| Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| | |
| First name | First name |
| First name | First name |
| Middle name | Middle name |
| Middle Hairie | Middle Harrie |
| Last name | Last name |
| | |
| First name | First name |
| | |
| Middle name | Middle name |
| | |
| Last name | Last name |
| VVV VV 0010 | WWW WW |
| XXX - XX- <u>0312</u> | XXX - XX- |
| OR | OR |
| 9 xx - xx- | 9 xx - xx- |
| | |
| | Olutayo First name Middle name Sholana Last name Suffix (Sr., Jr., II, III) First name Middle name Last name First name Middle name Last name XXX - XX - 0312 |

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| Debtor 1 Olutayo First Name | Sholana Middle Name Last Name | Case number (if known) |
|--|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Any business names and Employer Identification | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 20 Fix C4 | If Debtor 2 lives at a different address: |
| | 38 Fir St Number Street | Number Street |
| | Park Forest Illinois 60466 City State Zip Code | City State Zip Code |
| | Cook | Oity State Zip Gode |
| | County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | | |
| | City State Zip Code | City State Zip Code |
| Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

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| Debtor 1 Olutayo | | Sholana | | Case number (if knd | own) | |
|---|---|--|--|--|--|---|
| First Name | Middle Nam | e Last Name | | | | |
| Part 2: Tell the Court Abo | out Your Bankrup | tcy Case | | | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | brief description of each, see B2010)). Also, go to the top | | | | ndividuals Filing for |
| 8. How you will pay the fee | more details a cashier's check may pay with I need to pay Individuals to I request that judge may, but the official poyou choose the | entire fee when I file my about how you may pay. Took, or money order. If your a credit card or check with the fee in installments. If a Pay Your Filing Fee in Installment to the time to the waived (You in the time that applies to your soption, you must fill ound file it with your petition | ypically, if you attorney is so a pre-printer f you choose stallments (Omay request a your fee, an our family si ut the Applic | ou are paying the submitting your ed address. e this option, sig official Form 103 this option only d may do so only ze and you are u | e fee yourself, payment on y and attach to A). If you are filingly if your incommon payers. | you may pay with cash, our behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If |
| 9. Have you filed for bankruptcy within the last 8 years? | No. ✓ Yes. District District District | Northern District of Illinois | When When When | 9/13/2016 MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number | 1:2016bk29134 |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to Case number, Relationship to Case number, | if known |
| 11. Do you rent your residence? | ✓ No. | landlord obtained an eviction Go to line 12. Fill out <i>Initial Statement Abouthis</i> bankruptcy petition. | | | st You (Form 10 | 1A) and file it with |

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Debtor 1 Olutayo Sholana Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Olutayo Sholana Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for

waiver of credit counseling with the court.

about credit counseling, you must file a motion for

waiver of credit counseling with the court.

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| Debtor 1 Olutayo First Name | Sholar Middle Name Last Na | | nown) |
|---|--|--|--|
| | estions for Reporting Purposes | ame | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily con "incurred by an individual prin No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus | narily for a personal, family, or hou iness debts? Business debts are o trent or through the operation of | debts that you incurred to obtain the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds No. | | property is excluded and administrative cured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | ▼ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | ☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion |
| For you | correct. If I have chosen to file under Chapte of title 11, United States Code. I ununder Chapter 7. If no attorney represents me and I dout this document, I have obtained I request relief in accordance with the I understand making a false statemed connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 1519 /s/ Olutayo Sholana Signature of Debtor 1 | er 7, I am aware that I may proceed derstand the relief available under id not pay or agree to pay someon and read the notice required by 11 ne chapter of title 11, United State ent, concealing property, or obtain can result in fines up to \$250,000 9, and 3571. | s Code, specified in this petition. ing money or property by fraud in , or imprisonment for up to 20 years, or of Debtor 2 |
| | Executed on 8/22/2018 MM / DD / YY | Execute | MM / DD / YYYY |

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| Debtor 1 Olutayo | | Sholana | Case number (if | known) |
|--|---------------------------|-----------------------|-----------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | , or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | | • | | which § 707(b)(4)(D) applies, certify that I |
| represented by an | . , | | | ules filed with the petition is incorrect. |
| attorney, you do not | • | | | |
| need to file this page. | /s/ Hilary L Jabs | | Date | 8/22/2018 |
| | Signature of Attorney | for Debtor | M | M / DD / YYYY |
| | . , | | | |
| | | | | |
| | Hilary L Jabs | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Av | enue | | |
| | Street | Silue | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122234975 | Email address | hjabs@semradlaw.com |
| | | | _ | |
| | | | Illinois | <u> </u> |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Olutayo | | Sholana |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--|
| . Schedule A/B: Property (Official Form 106A/B) | \$2,000.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$2,000.00 ———————————————————————————————— |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$8,745.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$10,745.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | #15.100.55 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$15,168.55 ——————————————————————————————————— |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$4,067.85 |
| Your total liabilities | \$19,236.40 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| | |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,355.33 |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,355.33 |

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| Deb | otor 1 Olutayo | | Sholana | Case number (if known) | | | | | |
|-------------|---|--|------------------------------------|--|------------|--|--|--|--|
| | | liddle Name | Last Name | | | | | | |
| Part | 4: Answer These Questions for | Administrative | and Statistical Records | | | | | | |
| 6. A | Are you filing for bankruptcy under Ch | apters 7, 11, or 13 | ? | | | | | | |
| Г | No. You have nothing to report on the | nis part of the form. | Check this box and submit thi | s form to the court with your other so | chedules. | | | | |
| L | | | | , | | | | | |
| Ŀ | Yes. | | | | | | | | |
| 7. V | Vhat kind of debt do you have? | | | | | | | | |
| | ✓ Your debts are primarily consume | | | | | | | | |
| | family, or household purpose. 11 U. | S.C. § 101(8). Fill o | ut lines 8-10 for statistical purp | oses. 28 U.S.C. § 159. | | | | | |
| | Your debts are not primarily cons this form to the court with your othe | | ave nothing to report on this p | art of the form. Check this box and so | ubmit | | | | |
| | • | | | | | | | | |
| | From the Statement of Your Current Form 122A-1 Line 11; OR , Form 122B | | | income from Official | \$4,383.34 | | | | |
| | | | | | | | | | |
| 9. | Copy the following special categories | py the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | |
| | From Part 4 on Schedule E/F, copy to | he following: | | Total claim | | | | | |
| | On Demonstration of the line time of Community | ······································ | | \$0.00 | | | | | |
| | 9a. Domestic support obligations (Cop | y iine 6a.) | | * | | | | | |
| | 9b. Taxes and certain other debts you | owe the governmen | t. (Copy line 6b.) | \$0.00 | | | | | |
| | 9c. Claims for death or personal injury | while you were intox | kicated. (Copy line 6c.) | \$0.00 | | | | | |
| | 9d. Student loans. (Copy line 6f.) | | | \$0.00 | | | | | |
| | , | | | \$0.00 | | | | | |
| | 9e. Obligations arising out of a separati priority claims. (Copy line 6g.) | on agreement or div | orce that you did not report as | Ψ0.00 | | | | | |
| | | | | \$0.00 | | | | | |
| | 9f. Debts to pension or profit-sharing p | lans, and other simi | ilar debts. (Copy line 6h.) | <u></u> | | | | | |
| | | | | | | | | | |

\$0.00

9g. **Total.** Add lines 9a through 9f.

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| Fill in this | informatio | n to identify your o | case: | | | | | |
|--|--------------------------------------|---|--|----------------------|---|--------------------------------|---|--|
| Debtor 1 | | tayo | | | Sholana | | | |
| Debtor 2 | Firs | t Name | Middle N | Name | Last Name | | | |
| (Spouse, if fi | ling) Firs | t Name | Middle N | Name | Last Name | | | |
| United Sta | ates Bankru | ptcy Court for the: | Northern | | District of Illinois | | | |
| Case num | nber | | | | (State) | _ | | |
| Officia | al Form | n 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule A | \/B: Prope | erty | | | | | 12/1 |
| category v responsibl write your | where you le for supp name and | think it fits best. olying correct info d case number (if | Be as complete a rmation. If more s known). Answer e | nd a pace very | n asset only once. If an asset fits ccurate as possible. If two marri e is needed, attach a separate sh question. or Other Real Estate You Ow | ed people an neet to this f | re filing together, both a form. On the top of any a | re equally |
| 1. Do you | ı own or h | ave any legal or e | quitable interest | in an | y residence, building, land, or si | milar proper | ty? | |
| | No. Go to | Part 2 | | | | | | |
| ✓ | Yes. Whe | re is the property? | | | | | | |
| 1.1 | | | | Wh | sat is the property? Check all that Single-family home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| | Street add | Iress, if available, or olina St | other description | F | Duplex or multi-unit building | | | ims Secured by Property. |
| | Number | Street | | | Condominium or cooperative Manufactured or mobile home | | Current value of the entire property? \$500.00 | Current value of the portion you own? \$500.00 |
| | Gary | Indiana | 46409 | H | Land | | φσου.σο | ψ300.00 |
| | City | State | Zip Code | | Investment property | | Describe the nature of interest (such as fee s | |
| | Lake | | | | Timeshare | | the entireties, or a life | |
| | County | | | | Other | - | Charle if this is as | |
| | | | | Wh on | o has an interest in the property | ? Check | (see instructions) | mmunity property |
| | | | | ✓ | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and an | | | |
| | | | | pro | her information you wish to add a operty identification mber: | about this it | em, such as local | |
| If you | own or ha | ve more than one, | list here: | | | | | |
| 1.2 | | | | Wh | at is the property? Check all that Single-family home | apply. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2 | | lress, if available, or | other description | H | Duplex or multi-unit building | | Creditors Who Have Cla | ims Secured by Property. |
| | 4050 Joh Number | Street | | H | Condominium or cooperative | | Current value of the | Current value of the |
| | | | | F | Manufactured or mobile home | | entire property? \$500.00 | portion you own? \$500.00 |
| | Gary City | Indiana State | 46408 Zip Code | | Land | | Decembe the meture | f.va.vu avvuanahin |
| | , | State | Zip Code | | Investment property | | Describe the nature of interest (such as fee s | simple, tenancy by |
| | Lake County | | | | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | | o has an interest in the property | ? Check | Check if this is co | mmunity property |
| | | | | on | e. Debtor 1 only | | _ | |
| | | | | Ė | Debtor 2 only | | | |
| | | | | H | Debtor 1 and Debtor 2 only | | | |
| | | | | E | At least one of the debtors and an | other | | |
| | | | | | · her information you wish to add a operty identification | about this it | em, such as local | |
| | | | | | mbor | | | |

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| Debtor 1 | Olutayo | | Sholana | Case number | r (if known) | | |
|--|--|---|---|------------------|--|---|--|
| | First Name | Middle Name | Last Name | | | | |
| 1.3 Street address, if available, or oth 267 Pierce St Number Street | | | What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | oly. | the amount of any sec | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$500.00 | |
| <u>Gar</u> City <u>Lake</u> Cou | State e | | Land Investment property Timeshare Other Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | Describe the nature of interest (such as fee the entireties, or a life | of your ownership simple, tenancy by e estate), if known. | |
| | | | Other information you wish to add abo | | such as local | | |
| | | | property identification number: | at tills itelli, | ., suon as iocai | | |
| | the dollar value of the pove attached for Part 1. W | /rite that number h | . | ng any entrie | s for pages \$2 | 00.00 | |
| Do you ow you own th 3. Cars, va | nat someone else drives. If ns, trucks, tractors, sport u | r equitable interes you lease a vehicle, | t in any vehicles, whether they are reg also report it on Schedule G: Executory C cycles | • | • | | |
| ✓ Yes | | | | | | | |
| 3.1 | Make Model: Year: | Hyundai Elantra 2011 | Who has an interest in the propert one. Debtor 1 only | ty? Check | the amount of any sec | d claims or exemptions. Put cured claims on <i>Schedule D:</i> claims <i>Secured by Property</i> . | |
| | Approximate mileage: Other information: 2011 Hyundai Elantra | 410000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | | Current value of the entire property? \$4695.00 | Current value of the portion you own? \$4695.00 | |
| | | | Check if this is community pro instructions) | perty (see | | | |
| 3.2 | Make Model: Year: | | Who has an interest in the propert one. Debtor 1 only | ty? Check | the amount of any sec | d claims or exemptions. Put cured claims on <i>Schedule D:</i> <i>claims Secured by Property.</i> | |
| | Approximate mileage: | | Debtor 2 only Debtor 1 and Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? | |
| | Other information: | | At least one of the debtors and a | nother | | | |
| | | | Check if this is community pro | | | | |

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| | Olutayo First Name | Middle Name | Sholana Last Name | Case number | er (if known) | |
|-----|---|-------------|--|---|---|--|
| 3.3 | Make Model: Year: | | Who has an interest in the pone. Debtor 1 only | roperty? Check | the amount of any secu | claims or exemptions. Pur irred claims on <i>Schedule D</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only | ý | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors Check if this is communi instructions) | | | |
| 3.4 | Make Model: Year: | | Who has an interest in the pone. Debtor 1 only | roperty? Check | the amount of any secu | claims or exemptions. Pu ired claims on <i>Schedule L</i> iims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only | • | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors Check if this is communi instructions) | | | |
| | , | .,, | fishing vessels, snowmobiles, m | otorcycle accessor | ies | |
| 4.1 | No Yes | | Who has an interest in the pone. Debtor 1 only | ŕ | Do not deduct secured the amount of any secu | ıred claims on <i>Schedule L</i> |
| | No Yes Make Model: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communication. | roperty? Check y and another | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> i |
| 4.1 | No Yes Make Model: Year: Approximate mileage: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors | roperty? Check y and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secured. | claims or Schedule a s |
| 4.1 | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | roperty? Check y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secured. | claims or Schedule In Secured by Property. Current value of the portion you own? claims or exemptions. Purified claims on Schedule In Sc |
| 4.1 | No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communi instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | roperty? Check y and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | claims or exemptions. Pured claims on Schedule Laims Secured by Property. Current value of the |

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Bedroom sets (2), Living room set, Dining room set \$1000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Cell phone, TVs (3), Laptop, Ipad \$2000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Clothing \$1000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4000.00 for Part 3. Write that number here

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$50.00 17.1. Checking account: US Bank 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Dep. | for 1 Olutayo First Name | Middle Name | Sholana | Case number (if known) | |
|------|--------------------------------------|---|-----------------------------|--|-----|
| 20. | Government and corp | orate bonds and other negotial include personal checks, cashiers' | | | |
| | | ents are those you cannot transfer | | | |
| | ✓ No | | | | |
| | Yes. Give specific information about | Issuer name: | | | |
| | them | issuel flame. | | | |
| | | | | | |
| | | | | | • |
| 21. | Retirement or pension | | thrift savings accounts | or other pension or profit-sharing plans | |
| | _ | in, Emon, Reogn, 401(k), 403(b) | , tillit savings accounts, | of other pension of profit-straining plans | |
| | ✓ No Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | · - |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | No | | Institution name: | | |
| | Yes | Electric: | | | |
| | | Gas: | | | · - |
| | | Heating oil: | | | · - |
| | | Security deposit on rental unit: | | | · - |
| | | Prepaid rent: | | | · - |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | · - |
| | | Other: | | | · - |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for | a number of years) | |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | · - |

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| Debte | or 1 Olutayo | | Sholana | Case number (if known) | |
|-------|---|--|--|---|--|
| | First Name | Middle Name | Last Name | | |
| 24. | | ucation IRA, in an account in a b)(1), 529A(b), and 529(b)(1). | a qualified ABLE program, or un | der a qualified state tuition program. | |
| | Ves | tution name and description. Sep | parately file the records of any inter | ests.11 U.S.C. § 521(c): | |
| | | | | | |
| 25. | Trusts, equitable | or future interests in property | (other than anything listed in lir | ne 1), and rights or powers | |
| | exercisable for yo | ur benefit | | | |
| | Yes. Describe | | | | |
| 26. | | | and other intellectual property eds from royalties and licensing ag | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| 27. | Examples: Building | ses, and other general intangil permits, exclusive licenses, coop | bles perative association holdings, liquo | r licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| Mon | ey or property o | wed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or property o | | | | portion you own? Do not deduct secured |
| | Tax refunds owed | | | | portion you own? Do not deduct secured |
| | Tax refunds owed ∈ | o you | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed a No Yes. Give speciabout the you alread | ic information n, including whether y filed the returns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed a No Yes. Give speciabout the you alread and the tax | ic information n, including whether | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed a No Yes. Give speciabout the you alread and the ta Family support | ic information m, including whether y filed the returns x years | support, child support, maintenanc | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed a No Yes. Give speciabout the you alread and the ta Family support Examples: Past due | ic information m, including whether y filed the returns x years | support, child support, maintenanc | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed a No Yes. Give speciabout the you alread and the ta Family support Examples: Past due | ic information m, including whether y filed the returns x years | support, child support, maintenanc | State: Local: e, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed a No Yes. Give speciabout the you alread and the ta Family support Examples: Past due | ic information m, including whether y filed the returns x years | support, child support, maintenanc | State: Local: e, divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owed a No Yes. Give speciabout the you alread and the ta Family support Examples: Past due | ic information m, including whether y filed the returns x years | support, child support, maintenanc | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds owed a ✓ No Yes. Give speciabout the you alread and the ta Family support Examples: Past due ✓ No Yes. Give special | ic information m, including whether y filed the returns x years or lump sum alimony, spousal s ic information | support, child support, maintenanc | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed a ✓ No Yes. Give speciabout the you alread and the ta Family support Examples: Past due ✓ No Yes. Give special Other amounts soil Examples: Unpaid w | ic information m, including whether y filed the returns x years or lump sum alimony, spousal s ic information | ents, disability benefits, sick pay, va | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed a No Yes. Give specific about their you alread and the tax Family support Examples: Past due No Yes. Give specific Social Section | ic information m, including whether y filed the returns x years or lump sum alimony, spousal s ic information | ents, disability benefits, sick pay, va | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed a No Yes. Give specina about the you alread and the ta Family support Examples: Past due No Yes. Give specin Other amounts son Examples: Unpaid we Social Se | ic information m, including whether y filed the returns x years or lump sum alimony, spousal s ic information | ents, disability benefits, sick pay, va | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |

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| Debt | tor 1 Olutayo | | Sholana | Case number (if known) | |
|------|--|---------------------------|--|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disabil | | alth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insurrof each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property If you are the beneficiary property because someo | of a living trust, expect | someone who has died proceeds from a life insurance policy | v, or are currently entitled to receive | |
| | Ves. Describe | | | | |
| 33. | | | you have filed a lawsuit or made urance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and u | unliquidated claims of | every nature, including counterc | laims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets yo | u did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | • | n Part 4, including any entries fo | | \$50.00 |
| Part | 5: Describe Any Bu | siness-Related Pro | perty You Own or Have an Ir | nterest In. List any real estate in Part | 1. |
| 37. | | | terest in any business-related pro | | |
| 07. | No. Go to Part 6. Yes. Go to line 38. | y legal of equitable in | torest in any business related pro | Cu po Do | rrent value of the rtion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or | commissions you alro | eady earned | U | exemplions |
| | Ves. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | e, modems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, electro | onic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

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| | Case number (if known) |
|---|---------------------------------------|
| First Name Middle Name Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade | |
| | |
| ✓ No ☐ Yes. Describe | |
| 163. 2636186 | |
| | |
| 41. Inventory | |
| ✓ No | |
| Yes. Describe | |
| | |
| 42. Interests in partnerships or joint ventures | |
| ✓ No | |
| Yes. Give specific Name of entity: | % of ownership: |
| information about | |
| | |
| | |
| 43. Customer lists, mailing lists, or other compilations | |
| No No | |
| Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 10 | D1(41A))? |
| _ No | |
| Yes. Describe | |
| | |
| 44. Any business-related property you did not already list | |
| ✓ No | |
| Yes. Give specific | |
| information | |
| | |
| | |
| | |
| | |
| | |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you | u have attached |
| for Part 5. Write that number here | |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Ow | n or Have an Interest In. |
| If you own or have an interest in farmland, list it in Part 1. | |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing- | |
| ✓ No. Go to Part 7. | Current value of the portion you own? |
| Yes. Go to line 47. | Do not deduct secured claims |
| 47. Farm animals | or exemptions |
| Examples: Livestock, poultry, farm-raised fish | |
| ▼ No | |
| Yes. Describe | |
| | |

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| Deb | tor 1 | Olutayo First Name | | nolana st Name | Case number (if known) | |
|--------------|----------|--------------------------------|---|-----------------------|---|-------------|
| 48. | Cro | pps-either growing o | | SUNAME | | |
| | V | No | | | | |
| | Ħ | Yes. Describe | | | | |
| | | | | | | |
| 49. | Far | m and fishing equip | oment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | | | | | |
| 50. | Far | m and fishing suppl | lies, chemicals, and feed | | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | | L | | | | |
| 51. | Any | y farm- and comme | rcial fishing-related property you did n | ot already list | | |
| | ✓ | No Van Danaille | | | | |
| | Ш | Yes. Describe | | | | |
| | | | <u> </u> | | | |
| | | | l of your entries from Part 6, including | | ou have attached | |
|) IOI P | art o | . Write that number | nere | | | |
| | | | | | | |
| | | December All Due | t-V | -4 : Th -4 V Dist N - | Alliet Alcono | |
| Part 53. | | | perty You Own or Have an Interest perty of any kind you did not already list | | ot List Above | |
| 00. | | | s, country club membership | | | |
| | ✓ | No | | | | 1 |
| | | Yes. Give specific information | | | | |
| | | momadon | | | | |
| | | | | | | |
| 54. A | dd tl | ne dollar value of al | I of your entries from Part 7. Write tha | t number here | | <u> </u> |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Part | ٥. | List the Totals of | Each Part of this Form | | | |
| rait | ο. | List tile Totals Of | Lacif Fart of this form | | | |
| 55. I | Part | 1: Total real estate | , line 2 | | ······ | \$2000.00 |
| 56. ı | part | 2 total vehicles, lin | e 5 | # 4005.00 | | |
| | | | nd household items, line 15 | \$4695.00 | | |
| | | 4: Total financial as | | \$4000.00 | | |
| | | | elated property, line 45 | \$50.00 | | |
| | | | | | | |
| | | | ishing-related property, line 52 | | | |
| | | | erty not listed, line 54 | | | |
| 02. | ıota | ı personaı property. | Add lines 56 through 61 | \$8745.00 | Copy personal property total | + \$8745.00 |
| | | | | | 101 11 11 11 11 11 11 11 11 11 11 11 11 | ¢10745 00 |
| 63. T | otal | of all property on S | chedule A/B. Add line 55 + line 62 | | | \$10745.00 |

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| Debtor 1 | Olutayo | | Sholana | Case number (if known) | |
|----------|------------|-------------|-----------|------------------------|--|
| | First Name | Middle Name | Last Name | | |

Schedule A/B: Property. Additional page

| Part | 1: Descr | ibe Each Res | idence, Building, | Land, or Other Real Estate You Own or Have | an Interest In | |
|------|--------------------------------------|--------------|----------------------|--|--|---|
| 1.4 | Street addre 1179 Carol Number | | or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative | the amount of any secu Creditors Who Have Cla Current value of the | claims or exemptions. Put tred claims on <i>Schedule D:</i> nims Secured by Property. Current value of the |
| | Gary | Indiana | 46407 | Manufactured or mobile home | entire property? \$500.00 | portion you own? \$500.00 |
| | City State Zip Code Lake County | | Zip Code | Investment property Timeshare Other | Describe the nature of interest (such as fee state entireties, or a life | simple, tenancy by |
| | | | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Check if this is co | mmunity property |
| | | | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | |
| | | | | Other information you wish to add about this item property identification number: | , such as local | |

| | | Case 18-23670 | Doc 1 Filed 0 Docu | | 08/22/18 09:51: 79 | 244 Desc Main |
|--------------------------|--|--|---|---|--|--|
| Fill | in this inforr | mation to identify your case: | | | | |
| Del | otor 1 | Olutayo | | Sholana | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 ouse, if filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States B | ankruptcy Court for the: No | rthern D | District of Illinois | | |
| | | amaptoy court for the. | 141011 | (State) | | |
| | se number nown) | = | | | | |
| _ | | | | | | Check if this is an |
| O_1 | ticial | Form 106C | | | | amended filing |
| Sc | hedule | C: The Proper | ly You Claim a | s Exempt | | 04/16 |
| For stat the tax-und you | each iten te a specif amount o exempt re ler a law t r exempti | res, write your name and of property you claim a ric dollar amount as exe f any applicable statutor etirement funds—may be hat limits the exemption on would be limited to the tify the Property You Claim is the exemption to the property You Claim is the exemption to the property You Claim is the exemption to the property You Claim is the property You Clai | case number (if known as exempt, you must sompt. Alternatively, you ry limit. Some exempt so unlimited in dollar as to a particular dollar he applicable statutor aim as Exempt |). specify the amount of the umay claim the full fair may claim the full fair may claim the full fair may claim the such as those for hamount. However, if you camount and the value of y amount. | e exemption you cla narket value of the health aids, rights t claim an exemption the property is def | aim. One way of doing so is to property being exempted up to to receive certain benefits, and n of 100% of fair market value termined to exceed that amount, |
| 1. | | | = - | ven if your spouse is filing with options. 11 U.S.C. § 522(b)(3) | you. | |
| | | are claiming federal exempt | | | | |
| 2. | _ | - | | ∽ xempt, fill in the information | helow | |
| | i or any pr | operty you hat on concuun | . A/D that you olaim us c | xempt, iii iii tile iiioiiiiatioii | below. | |
| | | ription of the property and hedule A/B that lists this | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption y Check only one box for each | | Specific laws that allow exemption |

\$50.00

\$4,695.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

 $\overline{\mathbf{V}}$

 $\overline{\mathbf{A}}$

\$50.00

\$0

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

No Yes

Brief

description:

Line from Schedule A/B:

description:

Line from Schedule A/B:

Checking account, US

Hyundai Elantra, 2011,

2011 Hyundai Elantra

3. Are you claiming a homestead exemption of more than \$160,375?

735 ILCS 5/12-1001(b)

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$1,000.00 description: \checkmark \$1,000.00 Bedroom sets (2), Living 100% of fair market value, up to any room set, Dining room applicable statutory limit set Line from Schedule A/B: 06 Brief 735 ILCS 5/12-1001(a) description: \$1,000.00 **✓** \$1,000.00 Misc. Clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$2,000.00 description: $\overline{}$ \$2,000.00 Cell phone, TVs (3), 100% of fair market value, up to any Laptop, Ipad applicable statutory limit Line from

Schedule A/B:

07

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| Fill in | this inforn | nation to identify your cas | se: | - | | | |
|----------|-----------------|--|---|--|---------------------------|---------------------|--------------------|
| Debto | vr 1 | Olutavo | | Sholana | | | |
| Debic | ווע | Olutayo First Name | Middle Name | Last Name | | | |
| Debto | | | | | | | |
| (Spous | e, if filing) | First Name | Middle Name | Last Name | | | |
| United | d States Ba | ankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| | number | | | (State) | | | |
| (If knov | | - 4005 | | | | _ | Check if this is a |
| Off | icial I | orm 106D | | | | | amended filing |
| Scl | hedu | le D: Credito | ors Who Hav | ve Claims Secure | ed by Prop | erty | 12/1 |
| | | | | e are filing together, both are equa | | | formation. If |
| | • | eeded, copy the Additio number (if known). | nal Page, fill it out, num | ber the entries, and attach it to the | his form. On the top | of any additional p | ages, write your |
| | | reditors have claims se | cured by your proper | w2 | | | |
| 1. I | - | | | y: vith your other schedules. You hav | e nothing else to ren | ort on this form | |
| L | = | Fill in all of the information | | vier your outer sorteduies. Tournav | c nouning cise to rep | ort ort tills form. | |
| | | | Delow. | | | | |
| Part | | All Secured Claims | | | | | |
| 2. | | ecured claims. If a creditor for each claim. If more the | | ured claim, list the creditor icular claim, list the other creditors | Column A Amount of claim | Column B Value of | Column C Unsecured |
| | | · | | order according to the creditor's | Do not deduct the | collateral | portion |
| | name. | | | | value of collateral. | that supports | If any |
| 0.1 | CHGOFII | NCTR | | | \$6,090,00 | this claim | ¢1 295 00 |
| 2.1 | Creditor's | | | that secures the claim: | \$6,080.00 | \$4,695.00 | <u>\$1,385.00</u> |
| | 3538 W Numbe | Irving Park Rd r Street | 2011 Hyundai Elantra As of the date you file | the claim is: Check all that apply. | | | |
| | | Street | Contingent | the Claim is. Oneon all that apply. | | | |
| | Chicago | IL 60618 | Unliquidated | | | | |
| | City | State ZIP Code | Disputed | | | | |
| | | es the debt? Check one. | Nature of lien. Check a | Il that apply | | | |
| | | or 1 only or 2 only | _ | nade (such as mortgage or secured | | | |
| | | or 1 and Debtor 2 only | car loan) | nade (such as mortgage of secured | | | |
| | | ast one of the debtors | Statutory lien (such | as tax lien, mechanic's lien) | | | |
| | | another | Judgment lien from | a lawsuit | | | |
| | | ck if this claim relates community debt | Other (including a rig | ght to offset) | | | |
| | Date del | ot was 6/2014 | Last 4 digits of accour | nt number4240 | | | |
| 2.2 | | inty Treasurer | Describe the property | that secures the claim: | \$1,819.23 | \$500.00 | \$1,319.23 |
| | Creditor's I | | 3664 Carolina St, Gary, | IN 46409 Value: \$500.00 | | | |
| | Numbe | r Street | As of the date you file, | the claim is: Check all that apply. | | | |
| | | | Contingent | | | | |
| | Crown P | oint IN 46307 State ZIP Code | Unliquidated | | | | |
| | City Who owe | es the debt? Check one. | Disputed | | | | |
| | ✓ Debt | or 1 only | Nature of lien. Check a | ll that apply. | | | |
| | | or 2 only | An agreement you r car loan) | nade (such as mortgage or secured | | | |
| | | or 1 and Debtor 2 only | _ ′ | as tax lien, mechanic's lien) | | | |
| | | ast one of the debtors another | Judgment lien from | , | | | |
| | Che | ck if this claim relates | Other (including a right | | | | |
| | to a | community debt ot was | | · | | | |
| | incurred | | Last 4 digits of accour | nt number | | | |
| | | Add the dollar value of y here: | our entries in Column A | on this page. Write that number | \$7,899.23 | | |

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| Debte | or 1 Olutayo | | number (if known) | | |
|-------|--|--|--|---|--------------------------|
| | | liddle Name Last Name | | | |
| Pa | Additional Page | his asses assessment the many hardware to be in the control of the | Column A | Column B | Column C |
| | 2.4, and so forth. | his page, number them beginning with 2.3, followed by | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.3 | Lake County Treasurer | Describe the property that secures the claim: | \$2,641.72 | \$500.00 | \$2,141.72 |
| | Creditor's Name | | | | |
| | 2293 N Main St Number Street | 4050 Johnson St, Gary, IN 46408 Value: \$500.00 As of the date you file, the claim is: Check all that apply | | | |
| | | Contingent | | | |
| | Crown Point IN 46307 | Unliquidated | | | |
| | City State ZIP Code | Disputed | | | |
| | Who owes the debt? Check one. | | | | |
| | Debtor 1 only | Nature of lien. Check all that apply. | .i | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | a | | |
| | At least one of the debtors and | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | another | Judgment lien from a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| | Date debt was incurred | Last 4 digits of account number | | | |
| 2.4 | Lake County Treasurer Creditor's Name | Describe the property that secures the claim: | \$3,356.63 | \$500.00 | \$2,856.63 |
| | 2293 N Main St | 267 Pierce St, Gary, IN 46402 Value: \$500.00 | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply | | | |
| | | Contingent | | | |
| | Crown Point IN 46307 City State ZIP Code | Unliquidated | | | |
| | Who owes the debt? Check one. | Disputed | | | |
| | ✓ Debtor 1 only | Nature of lien. Check all that apply. | | | |
| | Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | d | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | another | Judgment lien from a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| | Date debt wasincurred | Last 4 digits of account number | | | |
| 2.5 | Lake County Treasurer Creditor's Name | Describe the property that secures the claim: | \$1,270.97 | \$500.00 | \$770.97 |
| | 18 N County St | 1179 Carolina St, Gary, IN 46407 Value: \$500.00 | | | |
| | Number Street Room 102 | As of the date you file, the claim is: Check all that apply | | | |
| | | Contingent | | | |
| | Waukegan IL 60085 City State ZIP Code | Unliquidated | | | |
| | Who owes the debt? Check one. | Disputed | | | |
| | Debtor 1 only | Nature of lien. Check all that apply. | | | |
| | Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | d | | |
| | Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| | At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| | Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| | Date debt was incurred | Last 4 digits of account number | | | |
| | Add the dollar value of you here: | ur entries in Column A on this page. Write that number | \$7,269.32 | | |
| | | our form, add the dollar value totals from all pages. | \$15,168.55 | † | |
| | Write that number here: | | · · · · · · · · · · · · · · · · · · · | | |

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| E:11 | | | | | | | | | |
|--------------------------------|---|---|---|---|---|---------------------------|------------------------|---------------------------------|--------------------------------|
| HIII | n this intorn | nation to identify your c | ase: | | | | | | |
| Deb | tor 1 | Olutayo | | Sholana | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| | tor 2 | | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | | |
| Uni | ed States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | | |
| 0 | | | | (State) | | | | | |
| (If kn | e number own) | | | | | | | | |
| <u> </u> | | 106F/F | | | | | Che | ck if this is ar | n amended filing |
| Oi | iciai re | orm 106E/F | | | | | ш | | |
| Sc | hedu | le E/F: Cre | editors Who | Have Uns | ecured Cla | ims | | | 12/15 |
| Forn clair the c know | n 106Å/B) a ns that are entries in th vn). | nd on Sc <i>hedule G: Exe</i> listed in <i>Schedule D: C</i> le boxes on the left. At | s or unexpired leases the cutory Contracts and Ui Creditors Who Hold Clain tach the Continuation P | nexpired Leases (Offic ns Secured by Propert | ial Form 106G). Do not i y. If more space is neede | nclude any ed, copy th | creditors e Part yo | s with partia u need, fill i | ally secured it out, number |
| 1. | Do any cr | editors have priority un | nsecured claims against | you? | | | | | |
| | ✓ No. G | io to Part 2. | | | | | | | |
| | Yes. | | | | | | | | |
| 2. | listed, iden As much a | tify what type of claim it s possible, list the claims | d claims. If a creditor has is. If a claim has both prios in alphabetical order according | ority and nonpriority amo | unts, list that claim here ar | nd show bo | oth priority | and nonprio | rity amounts. |
| | | • | re than one creditor holds claim, see the instructions | | e other creditors in Part 3. ruction booklet.) | | | irea ciairris, r | ill out the |

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** Cingular Wireless 4.1 \$1,080.07 Last 4 digits of account number Nonpriority Creditor's Name 2612 N Roan St When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 37601 Johnson City Tennessee Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Other Is the claim subject to offset? No Yes City of Chicago Department of Finance \$2,400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 333 South State Street Suite 330 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago 60604 Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Other Is the claim subject to offset? **✓** No Yes Illinois Tollway 4.3 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 2700 Ogden Ave Number As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove 60515 Illinois City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Nicor Gas \$587.78 Last 4 digits of account number Nonpriority Creditor's Name PO Box 0632 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60507 Aurora Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other Other. Specify _ V Is the claim subject to offset? No Yes Village of Park Forest \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 350 Victory Dr, Park Forest As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Park Forest Illinois 60466 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

 $\overline{\mathbf{v}}$

Notice Only

Check if this claim relates to a community debt

Is the claim subject to offset?

✓ No ✓ Yes Case 18-23670 Doc 1 Filed 08/22/18 Entered 08/22/18 09:51:44 Desc Main Document Page 28 of 79

Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name List Others to Be Notified About a Debt That You Already Listed Part 3: Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 111 W JACKSON BLVD S-400 Line 4.2 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured CHICAGO Illinois 60604 Last 4 digits of account number City State Zip Code Williamson and Brown LLC On which entry in Part 1 or Part 2 did you list the original creditor? Name 4691 Clifton Parkway Line 4.1 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Hamburg New York 14075 Last 4 digits of account number

City

State

Zip Code

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Debtor 1 Olutayo Sholana Case number (if known)
First Name Middle Name Last Name

| 1 11 01 140 | The Middle Marke | | | |
|--------------------------|---|-------|----------------------|------|
| Part 4: Add t | ne Amounts for Each Type of Unsecured Claim | | | |
| | amounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting | purp |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. | | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$4,067.85 | |
| | 6i Total Add lines 6f through 6i | 6i | \$4,067.85 | |

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| Debtor 1 Olutayo Sholana First Name Middle Name Last Name |
|---|
| First Name Middle Name Last Name |
| The trained wind and trained |
| Debtor 2 |
| (Spouse, if filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: Northern District of Illinois |
| (State) |
| Case number (If known) |
| (Indomy |
| Official Form 106G |

Fill in this information to identify your case

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| I | Person or compa | any with whom you have | the contract or lease | State what the contract or lease is for |
|-----|---|------------------------|-----------------------|---|
| 2.1 | Park Forest Coop Name 66 Fir Street | erative | | Residential Lease, Debtor is Lessee, Yearly Lease |
| | Number | Street | | |
| | Park Forest | Illinois | 60466 | |
| | City | State | Zip Code | |

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| | | 20 | camon ago | 01 01 10 |
|------------------------|---|---|------------------------------|--|
| Fill in this info | rmation to identify your o | ase: | | |
| Debtor 1 | Olutayo | | Sholana | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | |
| Coop number | | | (State) | |
| Case number (If known) | | | | |
| | | | | Check if this is an |
| | | | | amended filing |
| Official | Form 106H | | | |
| | | | | |
| Schedul | e H: Your Cod | debtors | | 12/15 |
| 1. Do you ha | er every question. ave any codebtors? (If yo | ou are filing a joint case, do | not list either spouse as a | • |
| Idaho, Lo | uisiana, Nevada, New Me | lived in a community pro kico, Puerto Rico, Texas, W | | (Community property states and territories include Arizona, California, .) |
| | Go to line 3. | | | |
| ☐ Yes | | er spouse, or legal equiva | lent live with you at the ti | me? |
| ✓ | No | | | |
| | Yes. In which communit | y state or territory did you | ı live? | Fill in the name and current address of that person. |
| | Name of your spouse, t | ormer spouse, or legal equ | ivalent | |
| | Number Street | | | |
| | City | State | Zip Coc | le |
| 3. In Colum | n 1, list all of your codel | otors. Do not include you | r spouse as a codebtor it | your spouse is filing with you. List the person shown in line 2 |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | _ | | | 3 | | |
|-------------------------------------|---|---|----------------------------|----------|---|--|-------------------------|
| Fill in | this information to identify | your case: | | | | | |
| Debtor | r 1 Olutayo | | Shola | na | | | |
| Bobio | First Name | Middle Name | Last N | | | Check if this is: | |
| Debtor | | | | | | | |
| (Spouse | e, if filing) First Name | Middle Name | Last N | lame | | An amended filing | |
| United | States Bankruptcy Court for | Northern | District of II | linois | [| A supplement showing post-p expenses as of the following of | |
| the: | aala a | | (5 | State) | | expenses as or the following t | iale. |
| (If know | number n) | | | | | MM / DD / YYYY | |
| Offic | cial Form 106I | | | | | | |
| - | edule I: Your In | come | | | | | 12/ ⁻ |
| respon inform spouse numbe | nsible for supplying correct ation about your spouse. | t information. If you ard If you are separated an I, attach a separate she y question. | e married a d your spou | nd no | t filing jointly, and yong the filing with you, o | 1 and Debtor 2), both are ed our spouse is living with you do not include information a ditional pages, write your na | i, include bout your |
| | | | Debtor | 1 | | Debtor 2 | |
| | ll in your employment formation. | | Debtoi | <u>'</u> | | Debtol 2 | |
| lf v | you have more than one job | Employment status | ✓ Emplo | oyed | | Employed | |
| - | you have more than one job, ach a separate page with | | Not E | mploye | ed | Not Employed | |
| | formation about additional apployers. | Occupation | Self-emple | ovmen | t | _ | |
| | | • | Jen-empi | oyiiieii | | | |
| | clude part time, seasonal, or If-employed work. | Employer's name | | | | | |
| 00 | ccupation may include student | Employer's address | | | | | |
| | homemaker, if it applies. | | Number St | reet | | Number Street | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | City | | State Zip Code | City State | Zip Code |
| | | How long employed | | | | | |
| | | there? | | | | | |
| Part | 2: Give Details About M | Monthly Income | | | | | |
| | | ycoc | | | | | |
| | nate monthly income as of se unless you are separated. | the date you file this fon | n. If you have | nothir | ng to report for any line | e, write \$0 in the space. Include | your non-filing |
| | or your non-filing spouse hav space, attach a separate she | | , combine the | inforn | nation for all employers | s for that person on the lines bek | w. If you need |
| | | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| | List monthly gross wages, saldeductions.) If not paid monthly be. | • | | 2. | \$0.00 | | |
| 3. I | Estimate and list monthly ove | rtime pay. | | 3. | + \$0.00 | | |
| 4. (| Calculate gross income. Add I | ine 2 + line 3. | | 4. | \$0.0 | | |
| | - | | | 1 - | **** | - | |

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| Debtor 10lutayo | Sholana | Case number | (if | |
|---|-----------------------|-----------------------|-----------------------------------|-------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → 4. | \$0.00 | | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$0.00 | | |
| 5h. Other deductions. Specify: | 5h. + | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines $5a+5b+5c+5d+5e+5h$. | 5f + 5g 6. | \$0.00 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin | ne 4. 7. | \$0.00 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing | | | | |
| gross receipts, ordinary and necessary business expenses, an the total monthly net income. | d 8a. | \$2,141.67 | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, o dependent regularly receive | | | | |
| Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement. | 8c. | \$0.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefi under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | ts 8f. | \$0.00 | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: Prorated Tax Refund | 8h. + | \$213.66 + | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | | \$2,355.33 | | |
| 3. Add all other modifie had miss out 1 ob 1 oc 1 ou 1 oc 1 of 1 og | - I | ψ2,000.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s | spouse | \$2,355.33 + | = | \$2,355.33 |
| 11. State all other regular contributions to the expenses that you include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or and | ur household, your d | ependents, your roomm | | |
| Specify: | | . , . | 11. + | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S | | | | \$2,355.33 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after No. | r you file this form? | | | |
| Yes. Explain: | | | | |
| L 165. Explain. | | | | |

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| Debtor 10lutayo | Shola | ana | Case n | iumber <i>(if</i> | | |
|--|------------------------|------------------|--------------|-------------------|------|--|
| First Name Middle N | ame Last | Name | known) | | | |
| Official Form 1061. Additional pag | ge. | | | | | |
| 8a.Net income from rental property and from op | perating a business, p | rofession, or fa | arm | | | |
| 8a.1 Uber | Debtor 1 | Debtor 2 | | | | |
| Gross receipts (before all deductions) | \$2,741.67 | | | | | |
| Ordinary and necessary operating expenses | - <u>\$600.00</u> | | | | | |
| Net monthly income from a business, professio | n, or \$2,141.67 | | Copy \$2,141 | .67 | | |

here

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| | | Doct | iment Page 35 of 7 | 9 | | |
|---------------------------------|--|--|---|-------------------|-------------------|-------------------|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Olutayo | | Sholana | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng | |
| United States F | Bankruptcy Court for the | | District of Illinois | A supplement s | howing post-pet | tition chapter 13 |
| | samapley court for the | · | (State) | expenses as of | the following dat | te: |
| Case number (If known) | | | | MM / DD / YYY | Y | |
| Official | Form 106J | | | | | |
| Schedul | e J: Your Exp | penses | | | | 12/15 |
| information. If (if known). Ans | more space is needed wer every question. | , attach another sheet to this | re filing together, both are equa s form. On the top of any addition | | | number |
| Part 1: Des | cribe Your Househo | old | | | | |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a s | separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 must f | ile Official Forms 106J-2, <i>Expe</i> | nses for Separate Household of Deb | otor 2. | | |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list D | I V I | es. Fill out this information for | Dependent's relationship to | Dependent's | Does depen | dent live |
| Debtor 2. | — 6 | each dependent | Debtor 1 or Debtor 2 | age | with you? | |
| | | | Child | 12 years | Yes. | |
| 3 Do your ev | penses include | | | | V 100. | |
| expenses o | | No | | | | |
| than yourself an | d your | ⁄es | | | | |
| dependents | s? | | | | | |
| Part 2: Esti | mate Your Ongoing | Monthly Expenses | | | | |
| | of a date after the ban | | you are using this form as a supp oplemental Schedule J, check th | | | |
| | | cash government assistance it on Schedule I: Your Income | | | Y | our expenses |
| | or home ownership e or the ground or lot. 4. | xpenses for your residence. In | nclude first mortgage payments and | l | 4. | \$575.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, or rer | nter's insurance | | | 4b. | \$0.00 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Olutayo Sholana Case number (if known)
First Name Middle Name Last Name

| 6. Utilities: 6a. \$200.0. 6b. Utilities: 6a. \$200.0. 6b. Other, sewer, garbage collection 6b. \$9.0. 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$140.0. 6d. Other. Speachy. 6d. \$0.0. 7. Food and housekeeping supplies 7. \$655.0. 8. Childcare and children's education costs 8. \$0.0. 9. Clothing, laundry, and dry cleaning 9. \$550.0. 10. Personal care products and services 10. \$850.0. 11. Medical and dental expenses 11. \$550.0. 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$355.0. 15. Insurance. 12. \$315.0. \$30.0. 16. Theratinement, clubs, recreation, newspapers, magazines, and books 13. \$0.0. 15. Insurance. 15. \$15.0. \$0.0. 15. Insurance. 15. \$0.0. \$0.0. 15. Insurance. 15. \$0.0. \$0.0. 15. Vehiclo insurance. 15. \$0.0. \$0.0. | First Name | Middle Name | Last Name | | |
|--|--------------------------------------|---------------------------------|---|-----|---------------|
| 6. Utilities: 6.a. \$200.0 6.b. Electricity, heat, natural gas 6.a. \$200.0 6b. Water, sewer, garbage collection 6b. \$94.0 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$14.0 6d. Other. Specify; 8d. \$9.0 7. Food and housekeeping supplies 8. \$9.0 8. Childcare and children's education costs 8. \$9.0 9. Clothing, laundry, and dry cleaning 9. \$550.0 10. Personal care products and services 10. \$890.0 10. Personal care products and services 11. \$850.5 11. Medical and dental expenses 11. \$550.0 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$315.0 Do not include car payments 13. \$9.0 14. Charitable contributions and religious donations 13. \$9.0 15. Insurance. 15a. \$9.0 15. Insurance. 15b. \$9.0 15. Insurance. 15b. \$9.0 15. Insurance. 15b. \$9.0 15. Insurance. 15b. \$9.0 | | | |) | Your expenses |
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| 6b. Water, sewer, garbage collection 6b. \$0. 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$14.0. 6d. Other. Spacefy: 7c. \$65.00 7c. Food and housekeeping supplies 7c. \$65.00 8c. Childcare and children's education costs 8c. \$0.00 9c. Clothing, laundry, and dry cleaning 9c. \$55.00 9c. Clothing, laundry, and dry cleaning 9c. \$55.00 10. Personal care products and services 11c. \$50.00 11. Medical and dental expenses 11. \$50.00 12. Transportation. Include gas, maintenance, bus or train fare. 12c. \$315.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a. \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15c. Vehicle insurance. Specity: 15b. \$0.00 15c. Vehicle insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15c. Vehicle insurance 15c. \$0.00 15c. Vehicle insurance 15c. \$0.00 15c. Vehicle insurance 1 | 6. Utilities: | | | | |
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| 15d. Other insurance. Specify: | 15b. Health insurance | | | 15b | \$0.00 |
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| 17c. Other. Specify: | | | | 17a | \$0.00 |
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| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.0 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.0 | 19.Other payments you make to su | pport others who do not | t live with you. | | |
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| 20d. Maintenance, repair, and upkeep expenses. 20d \$0.0 | 20b. Real estate taxes. | | | 20b | \$0.00 |
| | 20c. Property, homeowner's, or re | nter's insurance | | 20c | \$0.00 |
| 20e. Homeowner's association or condominium dues 20e \$0.0 | 20d. Maintenance, repair, and upk | eep expenses. | | 20d | \$0.00 |
| | 20e. Homeowner's association or | condominium dues | | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 | | | | Sholana | Case number (if known) | | |
|-------------------|------------|-----------------------|-------------------------|--|------------------------|-----|------------|
| | First Nan | ne | Middle Name | Last Name | | | |
| 21.Other | r. Specify | y: | | | | 21 | \$0.00 |
| | | | | | | | |
| | • | our monthly expense | es. | | | | \$2,130.00 |
| | | 4 through 21. | | | | | \$0.00 |
| | | e 22 (monthly expens | | \$2,130.00 | | | |
| 22c. <i>F</i> | Add line | 22a and 22b. The res | 22. | | | | |
| 23.Calcu | ılate yo | ur monthly net inco | me. | | | | |
| 23a. (| Copy line | e 12 (your combined | monthly income) from S | Schedule I. | | 23a | \$2,355.33 |
| 23b. (| Сору уо | ur monthly expenses | from line 22 above. | | | 23b | \$2,130.00 |
| | | , , , | es from your monthly in | ncome. | | | \$225.33 |
| • | The resu | It is your monthly ne | t income. | | | 23c | |
| 24. Do y o | ou expe | ct an increase or de | ecrease in your expens | ses within the year after y | ou file this form? | | |
| • | • | | | | | | |
| | | | | oan within the year or do yo nodification to the terms of y | | | |
| √ N | No | | | | | | |
| | /oo | | | | | | |
| □ ' | es | | | | | | |
| | | Explain here: | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|---|--|--|--|
| Debtor 1 | Olutayo | | Sholana | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | _ | | | |
| Case number (If known) | - | | (State) | _ | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | | |
|-----|--|---|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | | | | | | |
| × | /s/ Olutayo Sholana | × | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 8/22/2018 | Date | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | |

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| Fill in th | nis infori | mation to identify your c | ase: | | | | | | |
|--------------------|-------------------------|---|---------------------|-------------------------|----------------|--------------|------------|----------|-----------------------------------|
| Debtor | 1 | Olutayo | | S | holana | | | | |
| Dalata | 0 | First Name | Middle N | Name La | ast Name | | | | |
| Debtor (Spouse, | | First Name | Middle N | Name Li | ast Name | | | | |
| United | States B | ankruptcy Court for the: | Northern | District | of Illinois | | | | |
| Case n | | | | | (State) | | | | |
| Offic | cial | Form 107 | | | | | | | Check if this is a amended filing |
| | | nt of Financia | l Affairs f | or Individu | ıals Filir | ng for E | Bankru | ptcy | 04/1 |
| informa | ation. If | te and accurate as pos f more space is neede own). Answer every qu | d, attach a sepa | | | | | | |
| Part 1: | Give | Details About Your | Marital Status | and Where You | Lived Befor | re | | | |
| 1. V | What is | your current marital sta | tus? | | | | | | |
| [| ✓ Mar Not | ried married | | | | | | | |
| 2. [| Ouring t | he last 3 years, have yo | u lived anywhere | e other than where | e you live now | ? | | | |
| [| ✓ No Yes | . List all of the places yo | u lived in the last | t 3 years. Do not ir | nclude where | you live now | <u>'</u> . | | |
| | Deb | tor 1: | | Dates Debtor 1 there | lived De | otor 2: | | | Dates Debtor 2 lived there |
| | | | | | | Same as De | btor 1 | | Same as Debtor 1 |
| | Nun | nber Street | | From | Nu | mber Street | | | From |
| | City | State | Zip Code | | City | / | State | Zip Code | |
| | | | | | | Same as De | btor 1 | | Same as Debtor 1 |
| | Nun | nber Street | | From | Nu | mber Street | | | From |
| | City | State | Zip Code | | City | / | State | Zip Code | |
| | <i>d territor</i> No | e last 8 years, did you e ies include Arizona, Califo Make sure you fill out So | mia, Idaho, Louis | siana, Nevada, New | Mexico, Puerto | Rico, Texas | | | mmunity property states |

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| Did you have any income from employm | | | | |
|--|---|--|---|--|
| Fill in the total amount of income you receivactivities. If you are filing a joint case and you not | ved from all jobs and all bu | sinesses, including part-time | • | years? |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions are exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips ✓ Operating a business | \$19187.00 | Wages, commissions, bonuses, tips Operating a business | |
| For last calendar year: (January 1 to December 31, 2017) YYYY | Wages, commissions, bonuses, tips ✓ Operating a business | \$12994.00 | Wages, commissions, bonuses, tips Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a | \$13000.00 | Wages, commissions, bonuses, tips | |
| Did you receive any other income during Include income regardless of whether that in | ncome is taxable. Examples | s of other income are alimony; | | |
| nclude income regardless of whether that in public benefit payments; pensions; rental in filling a joint case and you have income that | this year or the two pre ncome is taxable. Examples come; interest; dividends; you received together, list | s of other income are alimony; money collected from lawsuits; it only once under Debtor 1. | child support; Social Security royalties; and gambling and | |
| Include income regardless of whether that in public benefit payments; pensions; rental includes a joint case and you have income that List each source and the gross income from | this year or the two pre ncome is taxable. Examples come; interest; dividends; you received together, list | s of other income are alimony; money collected from lawsuits; it only once under Debtor 1. | child support; Social Security royalties; and gambling and | |
| Include income regardless of whether that in public benefit payments; pensions; rental includes a joint case and you have income that List each source and the gross income from | this year or the two prencome is taxable. Examples come; interest; dividends; you received together, list a each source separately. D | s of other income are alimony; money collected from lawsuits; it only once under Debtor 1. | business child support; Social Security royalties; and gambling and listed in line 4. | |
| Include income regardless of whether that in public benefit payments; pensions; rental includes a joint case and you have income that List each source and the gross income from | this year or the two prencome is taxable. Examples come; interest; dividends; you received together, list each source separately. Debtor 1 Sources of income | s of other income are alimony; money collected from lawsuits; it only once under Debtor 1. To not include income that you Gross income from each source (before deductions | business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions a |
| Include income regardless of whether that in public benefit payments; pensions; rental include income that in public benefit payments; pensions; rental includes a joint case and you have income that List each source and the gross income from No Yes. Fill in the details. | this year or the two prencome is taxable. Examples come; interest; dividends; you received together, list each source separately. Debtor 1 Sources of income | s of other income are alimony; money collected from lawsuits; it only once under Debtor 1. To not include income that you Gross income from each source (before deductions | business child support; Social Security royalties; and gambling and listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions a |

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Debtor 1 Olutayo Sholana Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City Suppliers or State Zip Code vendors

Other

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| | | | | | olana | Case number | II KIIOWIY |
|----------|--|---|--|---|--|---|--|
| | First Name | | Middle Name | Last | Name | | |
| si rp | ders include your re porations of which y | latives; any rou are an r r a busines | general partners officer, director, p s you operate as | ; relatives of any g erson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? ou are a general partner; g securities; and any managing domestic support obligations, |
| / | No | | | | | | |
| J | Yes. List all paym | ents to an | insider. | Dalas of | Tableman | A | Daniel Gullian annual |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| - | City S | tate | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | itate | Zin Codo | | | | |
| | City S | late | Zip Code | | | | |
| nsi | | | n bankruptcy, u | you mane am | | | n account of a debt that benefited an |
| nclu | der? ude payments on de No Yes. List all payme | | nteed or cosigned | d by an insider. | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| nclu | ude payments on de | | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |
| Inclu | ude payments on de No Yes. List all payme | | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |
| | No Yes. List all payments on de No This in the North American Street Number Street | | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |
| ∀ | No Yes. List all payme Insider's Name Number Street City S | ents that b | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |
| | No Yes. List all payments on de No Yes. List all payments | ents that b | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |
| ∀ | No Yes. List all payme Insider's Name Number Street City S | ents that b | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |
| | No Yes. List all payme Insider's Name Number Street City S Insider's Name | ents that b | nteed or cosigned | d by an insider. der. Dates of | | Amount you | Reason for this payment |

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property 2011 Hyundai Elantra \$0 Chicago Finance Center Inc Creditor's Name Explain what happened 4024 W Montrose Ave Number Street Property was repossessed. Property was foreclosed. Chicago Illinois 60641 Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | or 1 | Olutayo | | Sholana | Case number (if known | n) | |
|------|----------|---|---------|---------------------------|--------------------------------|--------------------------|---------------------|
| | | First Name Middle Name | | Last Name | | | |
| 11. | | thin 90 days before you filed for bankruptc counts or refuse to make a payment becau | | | bank or financial institution, | set off any amou | ints from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | 1 | | Describe the action th | e creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | | | | |
| | | | | Last 4 digits of account | number: XXXX- | | |
| | | City State Zip Code | | | | | |
| 12. | | thin 1 year before you filed for bankruptcy, pointed receiver, a custodian, or another o | | y of your property in the | possession of an assignee f | or the benefit of o | creditors, a court- |
| | ✓ | No | | | | | |
| | | Yes | | | | | |
| Part | 5: | List Certain Gifts and Contributions | | | | | |
| 13. | Wi | ithin 2 years before you filed for bankruptc | , did y | ou give any gifts with a | otal value of more than \$60 | 0 per person? | |
| | | No Yes. Fill in the details for each gift. | | | | | |
| | | Gifts with a total value of more than \$60 per person |) | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Gave the Gift | | | | | |
| | | Number Street | | | | | |
| | | City State Zip Code | | | | | |
| | | Person's relationship to you | | | | | |
| | | Person to Whom You Gave the Gift | | | | | |
| | | Number Street | | | | | |
| | | City State Zip Code Person's relationship to you | | | | | |

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| eptor i | Olutayo | Sholana | Case number (if known | <i>i)</i> | |
|---------|---|---|-------------------------------|--------------------------|-------------------|
| | First Name Middle | Name Last Name | | | |
| | | | | | |
| . Wit | thin 2 years before you filed for bank | ruptcy, did you give any gifts or contrib | outions with a total value of | f more than \$600 | to any charity? |
| | l No | | | | |
| ✓ | No | | | | |
| | Yes. Fill in the details for each gift or | r contribution. | | | |
| | Gifts or contributions to charities | Describe what you con | tributed | Date you | Value |
| | that total more than \$600 | Describe what you com | induted | contributed | Value |
| | that total more than \$600 | | | Contributed | |
| | | | | | |
| | Charity's Name | | | | |
| | | | | | |
| | | | | | |
| | Number Street | | | | |
| | Number Street | | | | |
| | City State Zip | Ondo | | | |
| | City State Zip |) Code | | | |
| | List Contain Lance | | | | |
| rt 6: | List Certain Losses | | | | |
| ✓ □ | nbling? No Yes. Fill in the details. Describe the property you lost and | Describe any insurance | e coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Include the amount that pending insurance claims A/B: Property. | insurance has paid. List | loss | lost |
| | | | | | |
| | | | | | |
| 7. | List Certain Payments or Trans | fore | | | |
| | No | | | | |
| ✓ | Yes. Fill in the details. | | | | |
| | | Description and value o transferred | f any property | Date payment or transfer | |
| | | | | | Amount of payment |
| | | | | was made | payment |
| | Semrad Law Firm | Attorney's Fee - 250.00 | | | |
| | Person Who Was Paid | Aπomey's Fee - 250.00 | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue | Attorney's Fee - 250.00 | | was made | payment |
| | Person Who Was Paid | Attorney's Fee - 250.00 | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue | Attorney's Fee - 250.00 | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street | | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 | 0643 | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 | | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip | 0643 | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 | 0643 | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid Number Street | 0643 0 Code of You | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid Number Street | 0643 0 Code | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid Number Street City State Zip | 0643 0 Code of You | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid Number Street | 0643 0 Code of You | | was made | payment |
| | Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60 City State Zip Email or website address Person Who Made the Payment, if No Person Who Was Paid Number Street City State Zip | o Code | | was made | payment |

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| entoi i | Olutayo | | | Sholana | Case number (if k | nown) | |
|------------|---|---|---|--|-------------------------|---|------------------------------|
| | First Name | | Middle Name | Last Name | | | |
| he | | creditors | or to make payme | ou or anyone else acting on yents to your creditors? on line 16. | our behalf pay or tran | sfer any property to a | anyone who promised to |
| ✓ | No Yes. Fill in the details | S. | | | | | |
| | | | | Description and value of transferred | any property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Pai | d | | | | | |
| | Number Street | | | | | | |
| | City S | tate | Zip Code | | | | |
| the | ordinary course of you lude both outright trans of transfers that you hav | our busine sfers and tr e already lis | ss or financial af ansfers made as s | ecurity (such as the granting of | | | |
| | Yes. Fill in the details | S. | | Description and value of transferred | | e any property or ts received or debts p inge | Date transfer was made |
| | Person Who Received | d Transfer | | | | | |
| | Number Street | | | | | | |
| | City S Person's relationship | tate to you | Zip Code | | | | |
| | Person Who Received | d Transfer | | | | | |
| | Number Street | | | | | | |
| | City S Person's relationship | tate to you | Zip Code | | | | |
| be | thin 10 years before yneficiary? ese are often called ass | | | you transfer any property to | a self-settled trust or | similar device of wh | ich you are a |
| ✓ | No Yes. Fill in the details | S. | | | | | |
| | | | | Description and value o | f the property transfer | red | Date transfer was made |
| | Name of trust | | | | | | |

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Debtor 1 Olutayo Sholana Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

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Page 48 of 79 Document Debtor 1 Olutayo Sholana Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit

City

Number Street

State

Zip Code

State

Zip Code

NumberStreet

City

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| Debt | | Olutayo | | | Sholana | Case | number (if | known) | |
|------|------|----------------------------|---|------------|-----------------------|------------------------|-------------|---|----------------------|
| | | First Name | Middle Name | ' | Last Name | | | | |
| 26. | _ | | in any judicial or adm | inistrativ | e proceeding under | any environment | al law? Ind | clude settlements and or | ders. |
| | | No Yes. Fill in the det | ails. | | | | | | |
| | | | | Cou | rt or agency | | Nature o | of the case | Status of the case |
| | | Case title | | Cou | rt Name | | | | Pending |
| | | Case number | | Num | nberStreet | | | | On appeal Concluded |
| | | | | City | State | Zip Code | | | Concluded |
| Part | 11: | Give Details Ab | out Your Business | or Conne | ections to Any Bu | siness | | | |
| 27. | With | A sole proprie | etor or self-employed in a limited liability comp | n a trade, | profession, or other | r activity, either ful | _ | onnections to any busines | ss? |
| | | An officer, dir | ector, or managing ex at least 5% of the votin | | • | poration | | | |
| | | | bove applies. Go to Pa at apply above and fill | | ails below for each b | ousiness. | | | |
| | _ | | | | | ure of the busines | S | Employer Identification include Social Security | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | | | Name of account | ant or bookkeepe | r | Dates business existed | |
| | | City | State Zip Co | de | | | | From To | |
| | | | | | Describe the natu | ure of the busines | s | Employer Identification include Social Security | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | | | Name of account | ant or bookkeepe | r | Dates business existed | |
| | | City | State Zip Co | de | | | | FromTo | |
| | | | | | Describe the natu | ure of the busines | S | Employer Identification include Social Security | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | | | Name of account | ant or bookkeepe | r | Dates business existed | |
| | | City | State Zip Co | de | | | | From To | |
| | | | | | | | | | |

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| Debt | tor 1 Olutayo | | Sholana | Case number (if known) |
|----------|--|--|---|---|
| | First Name | Middle Name | Last Name | <u> </u> |
| 28. | Within 2 years before you creditors, or other parties No Yes. Fill in the details | 5. | ou give a financial statemen | t to anyone about your business? Include all financial institutions, |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Name | | IVIIVI/UU/TTTT | |
| | Number Street | | | |
| | | | <u> </u> | |
| | City | tate Zip Code | | |
| Part | 12: Sign Below | | | |
| t | rue and correct. I understa a bankruptcy case can rest | and that making a false stault in fines up to \$250,000, | atement, concea ^l ing propert or imprisonment for up to 2 | nts, and I declare under penalty of perjury that the answers are cy, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /\$/ Olu1 | ayo Sholana | | Signature of Debtor 2 |
| | Signature o | of Deptor 1 | | Date |
| | Date 8/22 | /2018 | | Date |
| | | ages to Your Statement o | f Financial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)? |
| <u> </u> | Ves No | | | |
| D | Did you pay or agree to pay | someone who is not an a | ttorney to help you fill out ba | ankruptcy forms? |
| [[. | . ✓ No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | et of Illinois | | | | |
|-----|---|---------------------------------|---|-------------------------------|--|--|--|
| re_ | Olutayo Sholana | | Case No. | | | | |
| | Debtor | | | (If known) | | | |
| | | | Chapter | Chapter 13 | | | |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | OR DEBTOR | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the p | petition in bankruptcy, or agreed to | o be paid to me, for services | | | |
| | For legal services, I have agreed to ac | cept | | \$4,000.00 | | | |
| | Prior to the filing of this statement I h | ave received | | \$250.00 | | | |
| | Balance Due | | | \$3,750.00 | | | |
| 2. | . The source of the compensation paid | to me was: | | | | | |
| | ✓ Debtor | Other (specify) | | | | | |
| 3. | . The source of the compensation paid | to me is: | | | | | |
| | ✓ Debtor | Other (specify) | | | | | |
| 4. | 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | |
| | | firm. A copy of the agreeme | th a other person or persons who a ent, together with a list of the name | | | | |
| 5. | . In return for the above-disclosed fee, a. Analysis of the debtor's finan- bankruptcy; | • | service for all aspects of the bank advice to the debtor in determinin | | | | |
| | b. Preparation and filing of any p | petition, schedules, statemen | nts of affairs and plan which may b | oe required; | | | |
| | c. Representation of the debtor | at the meeting of creditors ar | nd confirmation hearing, and any a | adjourned hearings thereof; | | | |
| | d. Representation of the debtor | in adversary proceedings and | d other contested bankruptcy mat | ters; | | | |
| 6. | . By agreement with the debtor(s), the a | above-disclosed fee does no | t include the following services: | | | | |
| | | | | | | | |
| | | CERTIFICA | ATION | | | | |
| | certify that the foregoing is a completeor(s) in this bankruptcy proceedings. | e statement of any agreemen | at or arrangement for payment to n | ne for representation of the | | | |
| | 8/22/2018 | | /s/ Hilary L Jabs | | | | |
| | Date | | Signature of Attorney | _ | | | |
| | | | Semrad Law Firm | | | | |
| | | | Name of law firm | | | | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- 3. Before signing this agreement, the attorney has received, \$250.00 toward the flat fee, leaving a balance due of \$3,750.00; and \$43.23 for expenses, leaving a balance due of \$4,103.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 8/22/2018 | |
|----------|-------------|------------------------|
| Signed: | : | |
| /s/ Olut | ayo Sholana | |
| | | /s/ Hilary L Jabs |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Sholana, Olutayo | Case No | Case No | | |
|-----------------|---|--|--------------------------------------|--|--|
| | Debtor(s) | Chapter. | Chapter13 | | |
| | VERIFICA | TION OF CREDITOR MAT | TRIX | | |
| Th knowledge | ne above named Debtors hereby verify the. | at the attached list of creditors is tr | rue and correct to the best of their | | |
| Date: | 8/22/2018 | /s/ Sholana, Olu Sholana, Olutayo Sianature of Dek | 0 | | |

CHGOFINCTR 3538 W Irving Park Rd Chicago, IL, 60618

City of Chicago Department of Finance 223 W Jackson Blvd Ste 512 C/O TALAN & KTSANES Chicago, IL, 60606

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Nicor Gas Po Box 549 Aurora, IL, 60507

Cingular Wireless 2612 N Roan St Johnson City, TN, 37601

Williamson and Brown LLC 4691 Clifton Parkway Hamburg, NY, 14075

Lake County Treasurer 2293 N Main St Crown Point, IN, 46307

Village of Park Forest 350 Victory Dr, Park Forest Park Forest, IL, 60466

Illinois Tollway PO Box 5544 Chicago, IL, 60680

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

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The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to \$ 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Sald funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filling, and the risks associated with the representation of debtors in bankruptcy cases in general.
- In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$353.23
- Before signing this agreement, the attorney has received, \$250.00 toward the flat fee, leaving a balance due of \$3,750.00; and \$43.23 for expenses, leaving a balance due of \$4,103.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 8/21/2018 | | | |
|-----------|-------------|-------------|------------------------|--|
| Signed: | | 1 | | |
| /s/ Oluta | ayo Sholana | <u> Uln</u> | | |
| | | | /s/ Hilary L Jabs | |
| Debtor(s | 3) | | Attorney for Debtor(s) | |

Do not sign if the fee amounts at top of this page are blank.

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Olutayo Sholana,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be \$225.00 at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of \$4,000.00, with an initial down payment of \$250.00.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees:

- 1. The trustee will be paid an estimated 4.7% of the plan payment.
- 2. The Firm's fees will be paid at approximately \$185.00/mo.
- CHGOFINCTR will be paid \$4,695.00 at 7% APR at a fixed monthly payment of \$29.00/mo until Firm's Fees are paid. Commencing with the December 2020 plan payment, CHGOFINCTR shall receive set payments in the amount of \$214.00 per month.
- 4. General Unsecured Creditors will be paid 10% pro-rata after all other creditors.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- A. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- B. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

THE SEMRAD LAW FIRM LLC

The of its Attorneys

Accepted:

Date: 08/21/2018

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| Debtor 1 Olutayo First Name | | nolana Case r | number (if known) |
|---|--|--|--|
| | estions for Reporting Purposes | at realing | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily of "incurred by an individual property No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily by | orimarily for a personal, fami business debts? Business of vestment or through the ope | debts are debts that you incurred to obtain eration of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that full No. | | y exempt property is excluded and administrative te to unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million |
| For you | correct. If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance wit I understand making a false state. | apter 7, I am aware that I ma understand the relief availa II did not pay or agree to pa ed and read the notice requ h the chapter of title 11, Un ement, concealing property, ase can result in fines up to 519, and 3571. | perjury that the information provided is true and by proceed, if eligible, under Chapter 7, 11,12, or 13 ble under each chapter, and I choose to proceed by someone who is not an attorney to help me fill ired by 11 U.S.C. § 342(b). ited States Code, specified in this petition. or obtaining money or property by fraud in \$250,000, or imprisonment for up to 20 years, or Signature of Debtor 2 Executed on |

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| Fill in this infor | | 2428 | | |
|---|------------------------------------|--------------------------|---|---|
| Debtor 1 | rmation to identify your o | ase: | Sholana | |
| Debto, 1 | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number | 12744-01281 0124, 1574-047 947-0-2 | | (State) | |
| Descriptions | Form 106De | eC | | Check if this is a amended filing |
| Declarat | tion About an | _ Individual Deb | tor's Schedules | 12/1 |
| | | ion with a bankruptcy ca | se can result in fines up to \$250,000, or imp | ement, concealing property, or obtaining risonment for up to 20 years, or both. 18 |
| | 1341, 1519, and 3571. | ion with a bankruptcy ca | | |
| U.S.C. §§ 152, Part 1: Sigr | 1341, 1519, and 3571. n Below | | | |
| U.S.C. §§ 152, Part 1: Sigr Did you p | 1341, 1519, and 3571. n Below | | ise can result in fines up to \$250,000, or imp | risonment for up to 20 years, or both. 18 |

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

Date 8/21/2018 MM/DD/YYYY

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| Debtor 1 Olutayo | | Sholana | Case number ((Fknown) |
|--|---------------------------------------|------------------------------|--|
| First Name | Middle Name | Last Name | |
| 8. Within 2 years before your creditors, or other part No Yes. Fill in the deta | ies. | you give a financial state | ment to anyone about your business? Include all financial institution |
| | 110 D010111 | Date issued | |
| | | Date Issued | |
| Name | | MM/DD/YYYY | _ |
| Number Street | | _ | |
| City | State Zip Code | | |
| Town Inches | | | |
| art 12: Sign Below | | | |
| a bankruptcy case can re | esult in fines up to \$250,00 | | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| Signatur | | | ACCOUNT TO A CONTRACT OF THE C |
| | re of Debtor 1 | *** | Signature of Debtor 2 |
| Date 8/ | re of Debtor 1 21/2018 | 182 | Signature of Debtor 2 Date |
| | 21/2018 | of Financial Affairs for Ind | Marie 1 |
| Did you attach additions | 21/2018 | of Financial Affairs for Ind | Date |
| | 21/2018 | of Financial Affairs for Ind | Date |
| Did you attach additiona No Yes | 21/2018 | | Date ividuals Filing for Bankruptcy (Official Form 107)? |
| Did you attach additiona No Yes | 21/2018 Il pages to Your Statement | | Date ividuals Filing for Bankruptcy (Official Form 107)? |

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: | Sholana, Olutayo Debtor(s) | Case No | |
|-----------------|-------------------------------|---|-------------------------------------|
| | | Chapter. | Chapter13 |
| | VERIFI | CATION OF CREDITOR MAT | RIX |
| Th knowledge | | ify that the attached list of creditors is tru | ue and correct to the best of their |
| 9 <u>8</u> 78 | 2 12 00 2 2 2 2 | | |
| Date: | 8/21/2018 | /s/ Sholana, Olut Sholana, Olutayo Signature of Deb | |

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| Debto | r 1 Olutayo First Name | Middle Name | Sholana Last Name | Case number ((fknown) | |
|--------|--|---|------------------------------|---|-------------|
| 16. | 5050534.2 27 88578 | family income that applies to | 10000110001100 | | |
| 1.0. | 16a. Fill in the state in w | vansa Ramanas | Illinois | | |
| | | of people in your household. | 2 | | |
| | | | | | \$68,687.00 |
| | household | amily income for your state and Ified in the separate instructions | To find | a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office. | 000,007.00 |
| 17. | How do the lines comp | are? | | | |
| | | | | form, check box 1, <i>Disposable income is not determined</i> <i>on of Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 1325 | | t Calculation of Dispose | ck box 2, <i>Disposable income is determined under 11</i> able Income (Official Form 122C-2). On line 39 of that | |
| Part : | Calculate Your C | ommitment Period Unde | r 11 U.S.C. §1325(b) | (4) | |
| 18. | Copy your total averag | e monthly income from line 1 | 1. | | \$4,383.34 |
| 19. | | | | anot filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13. | |
| | 19a. If the marital adjust | ment does not apply, fill in 0 or | line 19a. | | -\$0.00 |
| | 19b. Subtract line 19a | from line 18. | | | \$4,383.34 |
| 20. | Calculate your current | monthly income for the year | . Follow these steps: | | - |
| | 20a. Copy line 19b. | | | | \$4,383.34 |
| | Multiply by 12 (the | number of months in a year). | | | x 12 |
| | 20b. The result is your c | urrent monthly income for the y | ear for this part of the for | m | \$52,600.08 |
| | 20c. Copy the median fa | amily income for your state and | size of household from I | ine 16c. | \$68,687.00 |
| 21. | How do the lines comp | pare? | | | |
| | | n line 20c. Unless otherwise ord is 3 years. Go to Part 4. | lered by the court, on the | top of page 1 of this form, check box 3, The | |
| | Line 20b is more the | an or equal to line 20c. Unless of the period is 5 years. Go to Part 4. | otherwise ordered by the | court, on the top of page 1 of this form, check box | |
| Part | : Sign Below | | | | |
| | Signature of De Date 8/21/201 MM/DD/ | Sholana btor 1 | <u> </u> | Signature of Debtor 2 Date MM/DD/YYYY | |
| | | do NOT fill out or file Form 122 , fill out Form 122C-2 and file it | | 9 of that form, copy your current monthly income from I | ine 14 |

CHAPTER 13 DISCLAIMERS

| 1. | I understand that if I owe attorneys fees, those fees will be paid through the Chapter 13 plan and, to the extent allowed by the Bankruptcy Court, The Semrad Law Firm will likely be paid before any of my creditors are paid. |
|------------|---|
| * | |
| 2. | I understand that The Semrad Law Firm has pulled a credit report, but that said credit report does not report every debt I owe. I understand that it is my responsibility to provide all my debts to The Semrad Law Firm to list in my bankruptcy, and that failure to list a debt could be grounds for said debt(s) being not discharged in my case. |
| | <u>OS'</u> |
| 3, | I agree that in the preparation of my bankruptcy petition and schedules that I have disclosed to The Semrad Law Firm all my debts, sources of income, assets, personal property, real estate, transfers of real estate over the past 4 years, and expenses. |
| 4. | I agree that I will attend my creditors meeting at the time, date and location that will be given to me by The Semrad Law Firm, and also mailed to me by the Bankruptcy Court. That at this meeting I will bring my driver's license or State D, my social security card, and a recent pay stub if I am working. That failure of me to attend this meeting is grounds for my case to be dismissed. I also understand that failure to bring said requested documents to the meeting can be grounds for the meeting to not be held. |
| | _05 |
| 5. | I understand that The Semrad Law Firm will be paid first before all creditors unless otherwise agreed or ordered by the court. |
| 6. | I understand that my first trustee payment is due 30 days after the filing of my bankruptcy case, and every 30 days thereafter. I agree to make my liustee payment every 30 days, and that failure to make my trustee payments is grounds to have my case dismissed. |
| ′ . | I acknowledge that I have authorized The Semrad Law Firm to submit a payroll control order on my behalf (if applicable) to have my payment deducted from my payroll check each pay period. |

| 8. | I understand that if a payroll control order is being submitted, that it is unknown when the trustee payments will be deducted out of my paycheck (usually takes one to two months). I also agree to make my Trustee payment directly myself to the Trustee until I see the deductions come out of my paycheck. |
|-----|---|
| 9. | I understand and agree that it is ultimately my responsibility to make my trustee payments each month and monitor my paycheck each pay period to ensure that not only that the deduction is coming out of my paycheck, but also that it is the correct amount. I agree that if for some reason the trustee payment stops coming out of my paycheck, or I leave my job that it is my responsibility to make my trustee payments directly to the Trustee. |
| 10. | I understand that when making a trustee payment directly to the Trustee, it can only be made by money order or certified check, and that a personal check or cash cannot be sent to the Trustee. |
| 8 | |
| 11. | I agree that I am contributing all the disposable income I have available toward my Chapter 13 plan, and that if my plan is paying my unsecured creditors less than 100%, that the Bankruptcy Trustee can ask that my future tax refunds be tendered to my case while I am in my bankruptcy case. |
| 12. | I understand that if I want to incur credit such as to finance a car or real estate that I need court permission, and agree that I must contact my attorney to obtain such permission. |
| 13. | I understand that I must have filed my federal and state tax returns for the past 4 years if I was legally required to, and failure to have done so is grounds to have my case dismissed. |

I understand that if I am legally required by court order to pay domestic support obligations (child support, alimony), that falling in default is grounds to have my case dismissed and/or not receive a discharge in my case.

14.

| | e _i |
|-----|---|
| 15. | Understand that my Chapter 13 plan will run between 36 and 60 months depending on the amount of debt I have, and what the bankruptcy court requires my plan to run. |
| | 05 |
| 16. | I understand and agree to complete my 2nd credit counseling exit course before my case ends, and submit a copy of the certificate showing I completed this to my attorney. I also understand that failure to complete this requirement before my case ends is grounds to not receive my discharge. |
| 17. | If I have a garnishment coming out of my paycheck, I agree and understand that it is my responsibility to provide my payroll department with proof of my bankruptcy to stop said wage garnishment. It also my responsibility to contact the gamishing creditor and provide them with proof of my filling. |
| 18. | If a garnishment or voluntary deduction is coming out of my bank account, lagree that it is my responsibility to contact my bank to stop said deduction or garnishment by providing proof of bankruptcy, or requesting my bank to close my account and open a new account. |
| 19. | I understand that my monthly Trustee payment is not finalized and may increase or decrease due to a difference in my income, expenses, and/or my debt amounts. |
| 20, | I agree that I authorized The Semrad Law Firm to file my bankruptcy case, after I reviewed my bankruptcy petition and schedules. |
| 21. | I understand that the entire firm of The Semrad Law Firm represents me, and that while a different attorney might have counseled me and prepared my case, that once my case is filed, one of the attorneys at The Semrad Law Firm will be assigned as my attorney for the remainder of my case. |

22. I understand that if I have had (1) bankruptcy dismissed in the last 12 months, that I only have the benefit of the automatic stay for 30 days, until a motion is granted by the judge extending the automatic stay protection for the remainder of the case. That if the Judge denies my motion to extend the automatic stay that it is possible that creditors will still be able to take actions such as foreclosing on my real property, repossessing any vehicles, and garnishing my monies.

23. I understand that if I have had (2) or more bankruptcies dismissed in the last 12 months, that I do not have the benefit of the automatic stay upon the filing of the case, until a motion is granted by the judge imposing the automatic stay protection for the remainder of the case. Until the Judge grants such motion none of my property including my real property, cars or monies are not protected. That if the Judge denies my motion to impose the automatic stay that creditors will still be able to take actions such as foreclosing on my real property, repossessing any vehicles, and garnishing my monies.

24. I understand that if I owe any taxing authority such as the IRS or State of Illinois any income tax debt, that even though I am required to put this debt into my Chapter 13 plan, that tax authorities still have the legal right to offset my next tax refund by the amount(s) they are owed.